
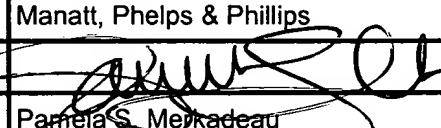


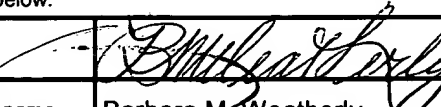
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	Application Number	09/921,228	
	Filing Date	August 1, 2001	
	First Named Inventor	Daniel J. MENDEZ	
	Art Unit	2141	
	Examiner Name	Robert B. Harrell	
Total Number of Pages in This Submission	2	Attorney Docket Number	25587-033-075

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <ul style="list-style-type: none"> • Request for Withdrawal as Attorney or Agent and Change of Correspondence Address (1 page) • Return Receipt Postcard
<div style="border: 1px solid black; padding: 5px; min-height: 100px;"> Remarks </div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Manatt, Phelps & Phillips		
Signature			
Printed name	Pamela S. Merikadeau		
Date	February 13, 2007	Reg. No.	53,318

CERTIFICATE OF TRANSMISSION/MAILING			
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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
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CORRESPONDENCE ADDRESS**

FEB 16 2007

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Filing Date	August 1, 2001
First Named Inventor	Daniel J. MENDEZ
Art Unit	2141
Examiner Name	Robert B. Harrell
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Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

☒ all the attorneys/agents of record.☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or☒ the attorneys/agents associated with Customer Number

36614

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are: Attorneys are no longer representing Applicant.

CORRESPONDENCE ADDRESS1. ☐ The correspondence address is NOT affected by this withdrawal.2. ☒ Change the correspondence address and direct all future correspondence to:☐ The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Scott McKeown OBLON, SPIVAK, McCLELLAND, MAIER & NEUSTADT, P.C.
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Country	United States
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Telephone	703-413-3000	Email	
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Signature: 

Name	Pamela S. Merkadeau	Registration No.	53,318
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Date	February 13, 2007	Telephone No.	650-812-1375
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NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.